

JUN 08 2005

EV550717319

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/622,295
	Filing Date	July 17, 2003
	First Named Inventor	Drewes
	Art Unit	2813
	Examiner Name	E. Kielin
Total Number of Pages in This Submission	Attorney Docket Number	MI22-2342

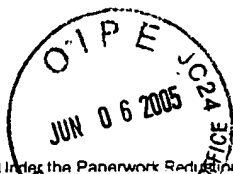
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached \$180	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	- PTO-1449 and copy of 2 cited references.
<input checked="" type="checkbox"/> Information Disclosure Statement (Supplemental)	<input type="checkbox"/> Request for Refund	- PTO Return Postcard.
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	- Chk. #147734
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Wells St. John P.S.		
Signature			
Printed name	David G. Latwesen, Ph.D.		
Date	6/6/05	Reg. No.	38,533

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being transmittal to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	
Typed or printed name	EV550717319
Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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EV550717319

PTO/SB/17 (12-04)

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Effective on 12/08/2004.
Fees published in the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180

Complete if Known

Application Number	10/622,295
Filing Date	July 17, 2003
First Named Inventor	J. Drewes
Examiner Name	E. Kielin
Art Unit	2813
Attorney Docket No.	MI22-2342

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account (#147734) Deposit Account Number: 23-0925 Deposit Account Name: Wells St. John P.S.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☒ Charge fee(s) indicated below (deficiencies) ☐ Charge fee(s) indicated below, except for the filing fee
☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
_____ - 20 or HP = _____	x _____	= _____
HP = highest number of total claims paid for, if greater than 20		
Indep. Claims	Extra Claims	Fee (\$)
_____ - 3 or HP = _____	x _____	= _____
HP = highest number of independent claims paid for, if greater than 3		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x _____	= _____	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Supplemental Information Disclosure Statement 180

SUBMITTED BY

Signature		Registration No. 38,533	Telephone 509-624-4276
Name (Print/Type)	David G. Latwesen, Ph.D.	(Attorney/Agent)	Date 6/16/05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

EV550717319

Inventor: Joel A. Drewes

Title: Methods of Forming Semiconductor Constructions

Assignee: Micron Technology, Inc.

Serial No.: 10/622,295

Filed: July 17, 2003

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

PURSUANT TO 37 C.F.R. §§ 1.56, 1.97 AND 1.98

The attached Form PTO-1449 is submitted in compliance with 37 CFR §1.56. Pursuant to FEDERAL REGISTER, Vol. 69, No. 182, pg. 56542 (September 21, 2004), no copies of any cited U.S. patents or U.S. published applications are included herewith. Copies of all other cited art are attached. No admission is made regarding whether the listed references are prior art.

This Supplemental Information Disclosure Statement is being resubmitted pursuant to Examiner request in the May 24, 2005 Office Action, because the citations were allegedly illegible.

Citation of these references is respectfully requested.

Respectfully submitted,

Date:

6/6/05

Attorney:

David G. Latwesen, Ph.D.

Reg. No. 38,533

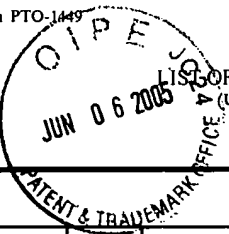
Wells St. John P.S.

06/09/2005 MAHRED1 00000109 10622295

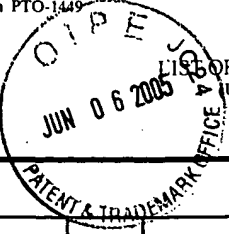
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Form PTO-1449		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		ATTY. DOCKET NO. M122-2342		SERIAL NO. 10/622,295	
 LIST OF ART CITED BY APPLICANT (Use several sheets if necessary)				APPLICANT Joel A. Drewes			
				FILING DATE July 17, 2003		GROUP 2813	
U.S. PATENT DOCUMENTS							
*Examiner Initial		Document Number	Date	Name	Class	Subclass	Filing Date If Appropriate
	AA	6,577,529 B1	06/03	Sharma et al.			
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						
	AL						
FOREIGN PATENT DOCUMENTS							
		Document Number	Date	Country	Class	Subclass	Translation
							Yes No
	AM						
	AN						
	AO						
	AP						
OTHER REFERENCES (including Author, Title, Date, Pertinent Pages, Etc.)							
	AQ		WEBSITE: http://digilander.iol.it/paeng/what_mu_metal.htm , "What's μ -metal?", printed 2/26/2002, 2 pages.				
	AR		WEBSITE: http://www.sciencenet.org.uk/database/Physics/9812/p01213d.html , "Physics & Astronomy: What's μ metal?", printed 2/26/2002, 1 pg.				
	AS						
EXAMINER				DATE CONSIDERED			
*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.							

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Form PTO-1449		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		ATTY. DOCKET NO. M122-2342		SERIAL NO. 10/622,295	
 LIST OF ART CITED BY APPLICANT (Use several sheets if necessary)				APPLICANT Joel A. Drewes			
				FILING DATE July 17, 2003		GROUP 2813	
U.S. PATENT DOCUMENTS							
*Examiner Initial		Document Number	Date	Name	Class	Subclass	Filing Date If Appropriate
	AA	US2002/0105035A1	08/02	Sandhu et al.			
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						
	AL						
FOREIGN PATENT DOCUMENTS							
		Document Number	Date	Country	Class	Subclass	Translation
							Yes No
	AM						
	AN						
	AO						
	AP						
	AQ						
OTHER REFERENCES (including Author, Title, Date, Pertinent Pages, Etc.)							
	AR						
	AS						
	AT						
EXAMINER				DATE CONSIDERED			
*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.							